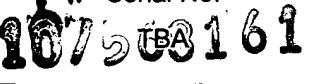
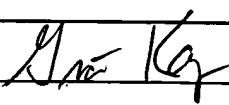


<b>TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT</b> (Under 37 CFR 1.97(b) or 1.97(c))		Docket No. 41587/401	
<b>In Re Application Of:</b> Robert Kopetzky			
Serial No. 	Filing Date Herewith	Examiner TBA	Group Art Unit TBA
<b>Title:</b> Adjustment Device for a Bowden Cable Arrangement			
Address to: MAIL STOP <b>Commissioner for Patents</b> P.O. Box 1450 Alexandria, VA 22131-1450			
<b>37 CFR 1.97(b)</b>			
1. <input checked="" type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.			
<b>37 CFR 1.97(c)</b>			
2. <input type="checkbox"/> The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:			
<input type="checkbox"/> the statement specified in 37 CFR 1.97(e); <b>OR</b> <input type="checkbox"/> the fee set forth in 37 CFR 1.17(p).			

<b>TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT</b> (Under 37 CFR 1.97(b) or 1.97(c))		Docket No. 41587/401
In Re Application: Robert Kopetzky		
Serial No. <b>10/568161</b> <small>TBA</small>	Filing Date Herewith	Examiner TBA
Title: Adjustment Device for a Bowden Cable Arrangement		
<b>Payment of Fee</b> <small>(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))</small> <p> <input type="checkbox"/> A check in the amount of \$ _____ is attached.  <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge and credit Deposit Account No. 08-3460 as described below. A duplicate copy of this sheet is enclosed.           </p> <p> <input type="checkbox"/> Charge the amount of \$ _____  <input checked="" type="checkbox"/> Credit any overpayment.  <input checked="" type="checkbox"/> Charge any additional fee required.         </p>		
 <small>Signature</small> Grant D. Kang, 37,651 Husch & Eppenberger, LLC 190 Carondelet Plaza St. Louis, MO 63105 314-480-1500 314-480-1505 FAX Date: <u>Feb. 13, 2006</u>		<b>Certificate of Mailing by Express Mail</b> <p>           I certify that this document and fee is being deposited on <u>2-13-2006</u> with the U.S. Postal Service as Express Mail under 37 C.F.R. 1.10 and addressed to Mail Stop, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22131-1450         </p> <p> <u>Express Mail No.: EV697643951US</u> </p> <p>   <small>Signature of Person Mailing Correspondence</small>            Karen K. Sonsteb  <small>Typed or Printed Name of Person Mailing Certificate</small> </p>
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## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

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Sheet 1

of 2

**Complete if Known**

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Application Number	TBA 1011568161
Filing Date	Herewith
Named Inventor	Robert Kopetzky
Unit	TBA
Examiner Name	TBA

Attorney Docket Number 41587-401

**U. S. PATENT DOCUMENTS**

## FOREIGN PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T
		Country Code <sup>3</sup> - Number <sup>4</sup> - Kind Code <sup>5</sup> (if known)				
		EP 0774590 A1				
		EP 0517583 A1				

**Examiner Signature** **Date Considered**  
\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached.

Translation is attached.  
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PTO/SB/08B (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

**(Use as many sheets as necessary)**

Shee

8

2

Application Number	TBA
Filing Date	Herewith
First Named Inventor	Robert Kopetzky
Art Unit	TBA
Examiner Name	TBA
Attorney Docket Number	41587-401

#### NON-PATENT LITERATURE DOCUMENTS

Examiner Signature		Date Considered	
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**\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.**

**1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.**

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